

2836

Please type a plus sign (+) inside this box → 

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/944,963
Filing Date	August 31, 2001
First Named Inventor	Sarathy Sribhashyam
Group Art Unit	2836
Examiner Name	Unknown
Total Number of Pages in This Submission	4
Attorney Docket Number	51185.00002

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Assignment and Recordation Cover Sheet (for an Application)	<input type="checkbox"/> Request to Correct Filing Receipt
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Drawing(s) _____ Sheets	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> With RCE	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Return Postcard
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Request for Continued Examination	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request (in duplicate)	<input type="checkbox"/> Power of Attorney	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> _____ Reference(s)	<input type="checkbox"/> Terminal Disclaimer	Request for Withdrawal as Attorney or Agent (in triplicate)
<input type="checkbox"/> IDS and Form 1449	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Declaration/Oath		
	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Marc A. Sockol, Reg. No. 40,823 Squire, Sanders & Dempsey, L.L.P. 600 Hansen Way Palo Alto, CA 94304-1043
Signature	
Date	April 30, 2003

RECEIVED  
MAY - 8 2003  
TECHNOLOGY CENTER 2800

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: April 30, 2003			
Typed or printed name	Sandy Yi		
Signature		Date	April 30, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

RECEIVED

MAY 12 2003

OFFICE OF PETITIONS

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

O P E J C T 03  
MAY 06 2003  
P A T E N T & T R A D E M A R K O F F I C E

## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/944,963
Filing Date	August 31, 2001
First Named Inventor	Sarathy Sribhashyam
Group Art Unit	2836
Examiner Name	Unknown
Attorney Docket Number	51185.00002

To: Assistant Commissioner for Patents  
Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified application.

The reasons for this request are: Client requested transfer of files to Fenwick & West LLP.

1.  The correspondence address is NOT affected by this withdrawal.

2.  Change the correspondence address and direct all future correspondence to:  
**CORRESPONDENCE ADDRESS**

Customer Number  Place Customer Number  
Bar Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	Greg T. Sueoka				
Address	Fenwick & West LLP				
Address	Silicon Valley Center, 801 California Street				
City	Mountain View	State	CA	ZIP	94041-2008
Country	USA				
Telephone	650-988-8500	Fax	650-938-5200		

This request is made on behalf of myself and  
 all the attorneys/agents of record,  
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
 the attorneys/agents associated with Customer Number \_\_\_\_\_

This request is enclosed in triplicate (including any attachments).

Name	Marc A. Sockol, Reg. No. 40,823 Squire, Sanders & Dempsey, L.L.P. 600 Hansen Way Palo Alto, CA 94304-1043
Signature	
Date	April 30, 2003

*NOTE: Withdrawal is effective when approved rather than when received*

*Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.*

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

TECHNOLOGY CENTER 2800  
RECEIVED  
MAY - 6 2003  
JUN 2 2003

RECEIVED

MAY 12 2003

OFFICE OF PATENTS